

Agency:	A to Z Counseling LLC	Region(s):	2
Agency Type:	DDA	Survey Dates:	11/28-29/2018
Certificate(s):	DDA-5363	Certificate(s)	☐ 6 - Month Provisional
		Granted:	□ 1 - Year Full
			☐ 3 - Year Full

	ntation, the   1. Application has been made for the ISP   2/14/	/2.2.1.2
16.03.21.009.01 009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS. 01. Verification of Compliance. The agency must verify that all employees, subcontractors, agents of the agency, and volunteers delivering DDA services have complied with IDAPA 16.05.06, "Criminal History and Background Checks."  For example: For staff #1 was no clearance letter in Further, there was no way the file that the process was in accordance with the ruidentified in the file, no not declaration on file).  For Contractor (Staff #5) to documentation that the completed the criminal hiprocess with the agency.	rance for all  Employee hire date has been added to identified employee files. Policy exists for requirement that all new employees apply and complete the process for Criminal History and Background Checks. A paper trail of this process will be placed in each employee file as required paperwork is completed. Staff # 5 is a contractor. Staff #5 will provide A to Z Counseling, LLC., DDA with a copy of her most recent criminal history clearance.  2. A review of the agency hiring procedures and QA system has been	/2019



16.03.21.400.03.a. 400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES. Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. 03. Clinical Supervisor Duties. A clinical supervisor must be employed by the DDA on a continuous and regularly scheduled basis and be readily available on-site to provide for: a. The supervision of service elements of the agency, including face to face supervision of agency staff providing direct care services;	In review of agency documentation, the clinical supervisors were not completing face to face supervision of agency staff providing direct care services.  For example, for staff #2, there were no observations completed on supervised staff or meeting notes.  For example, for staff #5, there were no meeting notes and no observations until November.	3. Dianne Cochran, Clinical Supervisor 4. A regular review of the employee files will occur through the agency's QA program to ensure that documentation of employee clearance letter will be appropriately filed in employee files within 14 days of clearance and that the process for Criminal History and Background Check is followed per policy procedure.  1. Habilitative Interventionist/Clinical Supervisor will review Habilitative Staff files on a weekly basis 2. The Clinical Supervisor will review all employee files on a weekly basis to ensure documentation of face to face staff observation, meeting notes are included in staff file. 3. Dianne Cochran, Clinical Supervisor 4. A monthly review of the employee files will occur through the agency's QA program to ensure that documentation of employee face to face supervision to include written observation and meeting notes.	2/14/2019
16.03.21.400.03.b.	In review of agency documentation, there was not observation of the direct	1. Habilitative Interventionist/Clinical Supervisor will review all Staff files on a	2/14/2019



400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES. Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. 03. Clinical Supervisor Duties. A clinical supervisor must be employed by the DDA on a continuous and regularly scheduled basis and be readily available on-site to provide for: b. The observation and review of the direct services performed by all paraprofessional and professional staff on at least a monthly basis, or more often as necessary, to ensure staff demonstrate the necessary skills to correctly provide the DDA services.	services performed by all paraprofessional and professional staff on at least a monthly basis.  For example: For staff #2, there was no documentation of observation of direct service paraprofessional staff since the agency began providing services.  For example: For subcontractor/staff #5, there was only one documented observation of direct services provided by the professional staff since the agency began providing services.	weekly basis for written documentation of observations and direct services provided to participants. Habilitative Interventionist/ Clinical supervisor will observe all staff monthly when staff is providing direct services.  2. Monthly meetings, to include a back-up meeting date, have been set for Staff #5 to observe direct services provided by the professional staff  3. Dianne Cochran, Clinical Supervisor  4. A monthly review of the employee files will occur through the agency's QA program to ensure that documentation of employee direct services were performed by all paraprofessional and professional staff on at least a monthly basis, or more often as necessary, to ensure staff demonstrate the necessary skills to correctly provide the DDA services.	
16.03.21400.07.a. 400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES. Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. 07. Paraprofessionals. A person qualified to provide support services must meet the following minimum requirements:	In review of agency documentation, documentation was missing to support that staff met qualifications to provide Habilitative Support Services.  Reference IDAPA 16.03.10.665.02 for qualification requirements. The	1. Review of hiring procedure to clarify requirements when hiring Habilitative Supports. Completion of Habilitative Supports coursework is supported by Certificate of Completion in staff files.  2. When hiring Habilitative Supports without the required 6 months of supervised experience working with children with	2/14/2019

a. Meet the qualifications prescribed for the type of services to be rendered;

following components were not located in Staff #3's employment record:

16.03.10.665.02.c. Have received instructions in the needs of the participant who will be provided the service; 16.03.10.665.02.d. Demonstrate the ability to provide services according to a plan of service;

16.03.10.665.02.e. Must have six (6) months supervised experience working with children with developmental disabilities. This can be achieved in the following ways: (7-1-11) i. Have previous work experience gained through paid employment, university practicum experience, or internship; or 16.03.10.665.02.e.ii. Have on-the-job supervised experience gained through employment at a DDA or the Infant Toddler Program with increased supervision. Experience is gained by completing at least six (6) hours of job shadowing prior to the delivery of direct support services, and a minimum of weekly face-to-face supervision with the clinical supervisor for a period of six (6) months while delivering services. 16.03.10.665.02.f. Must complete competency coursework approved by the Department to demonstrate competencies

Developmental Disabilities, documentation will be placed in Staff file which includes documentation reflecting at least six (6) hours of job shadowing prior to the delivery of direct support services, and a minimum of weekly face-to-face supervision with the clinical supervisor for a period of six (6) months while delivering services. Currently Staff #3 is not providing services until he has demonstrated competency work through the University of Idaho – Habilitative Supports Certification.

- 3. Dianne Cochran, Clinical Supervisor
- 4. A monthly review of the employee files will occur through the agency's QA program to ensure that each Staff file include documentation to support that they have met and continue to meet the qualifications to provide Habilitative Support Services.



	related to the requirements to provide habilitative supports.		
16.03.21.410.01. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must:	In review of agency documentation, there is no methodology in place to determine if twelve (12) hours of formal training have been completed each calendar year.	1. Meet with current Staff to develop a plan for training in order to meet the 12 hours of formal t 2. Develop a training sheet and place in Habilitative Interventionist/Clinical Supervisor file as well as in each staff file to indicate completed formal training hours, and specific training 3. Dianne Cochran, Clinical Supervisor 4. A regular review of the employee files will occur through the agency's QA program to ensure that documentation of on-going 12 hours of formal training are completed each calendar year.	2/14/2019
16.03.21.410.01.b 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must:	In review of agency documentation for staff #3, there was no documentation that the staff had completed CPR and First aid within 90 day of hire or up to this date.	<ol> <li>Review Staff files weekly, against the list of required documentation that is required for each Staff – keeping an Excell File which flags dates that documents are due.</li> <li>Staff #3 was hired October 22, 2018 – and as of this date he has completed CPR and First Aid Training. A copy of his completion of CPR and First Aid Training – Card has been placed in his file.</li> <li>Dianne Cochran, Clinical Supervisor</li> </ol>	2/14/2019



b. Be certified in CPR and first aid within ninety (90) days of hire and maintain current certification thereafter;  16.03.21.410.01.b.i 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must: b. Be certified in CPR and first aid within ninety (90) days of hire and maintain current certification thereafter; and i. The agency must ensure that CPR and first-aid trained staff are present or accompany participants when services or DDA-sponsored activities are being provided.	In review of agency documentation and discussion with the Clinical Supervisor, Staff #3, provided 1 day of service without documentation of having completed the required CPR and first aid training. Further, during this service delivery, there is no documentation to support that staff who had completed CPR and First-aid training accompanied the participant when services were provided.	<ul> <li>4. A regular review of the employee files will occur through the agency's QA program to ensure documentation of Staff completion of CPR/First Aid is up to date.</li> <li>1. Funds received for Staff #3 1 day of service will be returned to State of Idaho</li> <li>2. Review Staff files weekly, against the list of required documentation that is required for each Staff – keeping an Excel File which flags dates that documents are due for each Staff member.</li> <li>3. Dianne Cochran, Clinical Supervisor</li> <li>4. The agency's QA system has been updated with regular review intervals to ensure compliance with this rule.</li> </ul>	2/14/2019
500 00 4 CT 4 55 5 1 00 4 1 1 1	In review of agency documentation, there was no documentation that staff #3 had age appropriate CPR and First Aid certification. Staff #3 must ensure that	1. Age appropriate CPR and First Aid Certification has been taken within the 90 days of hire and placed in Staff #3 File. Review Staff files weekly, against	2/14/2019



01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must:  b. Be certified in CPR and first aid within ninety (90) days of hire and maintain current certification thereafter; and ii. Each agency staff person must have age appropriate CPR and first aid certification for the participants he serves.	CPR and first-aid training is for the correct age group of participants served.	the list of required documentation that is required for each Staff  2. Review Staff files weekly, against the list of required documentation that is required for each Staff  3. Dianne Cochran, Clinical Supervisor  4. The agency's QA system has been updated with regular review intervals to ensure compliance with this rule.	
16.03.21.410.01.c. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must: c. Be trained to meet any special health or medical requirements of the participants they serve.	In review of agency documentation, for Staff #3, assigned to provide services to participant #2, there was no documentation to support that staff was trained on participant's special health or medical requirements.	<ol> <li>When setting up assignments, use training form – revise as necessary - to record Staff participation in training specific to assigned participant and their unique special health or medical requirements/needs.</li> <li>Prior to working with participants, each staff will be trained on participant's special health or medical requirements. To date, staff has been trained and documented on any special health or medical requirements regarding the participants they serve.</li> <li>Dianne Cochran, Clinical Supervisor</li> </ol>	2/14/2019



16.03.21.410.02. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service deliver to the participant is completed as follows: 02. Sufficient Training. Training of all staff must include the following as applicable to their work assignments and responsibilities:	training to stair as applicable to their	<ul> <li>4. A regular review of the employee files will occur through the agency's QA program to ensure documentation that Staff was trained on participants special health or medical requirements</li> <li>1. Training form will be adapted to reflect participant optimal independence through encouragement and support</li> <li>2. Review and revise Staff Training form to reflect training of staff responsibilities relative to rules a, b, c, d, and e.</li> <li>3. Dianne Cochran, Clinical Supervisor</li> <li>4. The agency's QA system has been updated with regular review intervals to ensure compliance with this rule.</li> </ul>	2/14/2019
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16.03.21.410.03.a 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 03. Additional Training for Professionals. Training of all professional staff must include the following as applicable to their work assignments and responsibilities:	e. Participant's rights, advocacy resources, confidentiality, safety, and welfare;  In review of agency documentation, there is no documentation of training staff on the correct and consistent implementation of all participants' individual program plans and implementation plans to achieve individual objectives.	<ol> <li>Review of Training documentation form to indicate compliance of participant individual programs and objectives</li> <li>A review of all staff files has been conducted to ensure compliance with this rule.</li> <li>Dianne Cochran, Clinical Supervisor</li> </ol>	2/14/2019
a. Correct and consistent implementation of all participants' individual program plans and implementation plans, to achieve individual objectives;		4. A regular review of the employee files will occur through the agency's QA program to ensure that documentation of employee training on the correct and consistent implementation of all participant's individual program plans and implementation plans to achieve individual objectives	
16.03.21.410.03.b. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 03. Additional Training for Professionals. Training of all professional staff must include	In review of agency documentation, for staff #1 and #3 there was no documentation of training provided on consistent use of behavioral and developmental programming principles and the use of positive behavioral intervention techniques.	<ol> <li>Each requirement will be documented, dated, signed and credentialed</li> <li>Document on-going training of Staff on the consistent use of behavioral and developmental programming through use of PBIS</li> </ol>	2/14/2019



the following as applicable to their work assignments and responsibilities: b. Consistent use of behavioral and developmental programming principles and the use of positive behavioral intervention techniques.		3. Dianne Cochran, Clinical Supervisor 4. A regular review of the employee files will occur through the agency's QA program to ensure that documentation of Staff on-going training referencing use of current behavioral and developmental programming principles as well at use of PBIS interventions.	
16.03.21.500.04.b. 500.FACILITY STANDARDS FOR AGENCIES PROVIDING CENTER-BASED SERVICES. The requirements in Section 500 of this rule, apply when an agency is providing centerbased services. 04. Evacuation Plans. Evacuation plans must be posted throughout the center. Plans must indicate point of orientation, location of all fire extinguishers, location of all fire exits, and designated meeting area outside of the building. b. A brief summary of each fire drill conducted must be written and maintained on file. The summary must indicate the date and time the drill occurred, participants and staff participating, problems encountered, and corrective action(s) taken.	In review of agency documentation, the fire drill form used did not document the participants and staff participating in the fire drill conducted.	<ol> <li>The fire drill documentation form was updated to include the participants and staff involved,</li> <li>The agency documentation procedures have been updated to include participants and staff involved</li> <li>Dianne Cochran, Clinical Supervisor</li> <li>A regular review of the employee files will occur through the agency's QA program to ensure that documentation of participants and staff involved in the fired drill are included on the fire drill documentation form.</li> </ol>	2/14/2019



16.03.21.501.05. 501. VEHICLE SAFETY REQUIREMENTS. Each DDA that transports participants must: 05. Liability Insurance. Continuously maintain liability insurance that covers all passengers and meets the minimum liability insurance requirements under Idaho law. If an agency employee transports participants in the employee's personal vehicle, the agency must ensure that adequate liability insurance coverage is carried to cover those circumstances.	In review of agency documentation, for staff #1, the liability insurance on file expired 5/22/18.	<ol> <li>Placed current liability insurance documentation in Staff file as it is due and required</li> <li>Using Excel to monitor Staff requirements due date.</li> <li>Dianne Cochran, Clinical Supervisor</li> <li>The agency's QA system has been updated with regular review intervals to ensure compliance with this rule.</li> </ol>	2/14/2019
16.03.21.510.03. 510.HEALTH REQUIREMENTS. 03. Employees. Each employee who has direct contact with participants must be free of communicable disease and infected skin lesions while on duty.	In review of agency documentation, there is no methodology implemented to document that each employee who has direct contact with participants must be free from communicable disease and infected skin lesions while on duty.	1. The Communicable Disease and Infected Skin Lesions while on duty was updated to include the participants and staff and placed in appropriate Staff File 2. The agency documentation procedures have been updated to include Communicable Disease and Infected Skin Lesions while on duty signed by staff and placed in each staff file 3. Dianne Cochran, Clinical Supervisor 4. A regular review of the employee files will occur through the agency's QA program to ensure that documentation of staff signed Communicable Disease and Infected Skin Lesions is in staff file	2/14/2019



#### 16.03.21.601.01.b.

601. Each DDA certified under these rules must maintain accurate, current, and complete participant and administrative records. These records must be maintained for at least five (5) years. Each participant record must support the individual's choices, interests, and needs that result in the type and amount of each service provided. Each participant record must clearly document the date, time, duration, and type of service, and include the signature of the individual providing the service, for each service provided. Each signature must be accompanied both by credentials and the date signed Each agency must have an integrated participant records system to provide past and current information and to safeguard participant confidentiality under these rules.

- 01. General Records Requirements. Each participant record must contain the following information:
- b. Program implementation plans that include participant's name, baseline statement, measurable objectives, written instructions to staff, service environments, target date, and corresponding program documentation and monitoring records

In review of agency documentation, the Program Implementation Plans developed by the HI staff were not signed, dated and credentialed by the HI staff, nor were they reviewed, signed, dated and credentialed by the clinical supervisor. (reference IDAPA 16.03.19.654.05- Program Implementation Plan Requirements.)

- 1. The PIP's have been signed, dated and credentialed by the HI Staff, and will be reviewed, signed, dated and credentialed by the clinical supervisor on 12.19.20.
- 2. All PIP's will be signed, dated and credentialed by the HI Staff and will be reviewed by the Clinical Supervisor on a monthly basis.
- 3. Dianne Cochran, Clinical Supervisor
- 4. The agency's QA system has been updated with regular review intervals to ensure compliance with this rule.

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when intervention services are delivered to the participant.			
16.03.21.601.01.d. 601. Each DDA certified under these rules must maintain accurate, current, and complete participant and administrative records. These records must be maintained for at least five (5) years. Each participant record must support the individual's choices, interests, and needs that result in the type and amount of each service provided. Each participant record must clearly document the date, time, duration, and type of service, and include the signature of the individual providing the service, for each service provided. Each signature must be accompanied both by credentials and the date signed. Each agency must have an integrated participant records system to provide past and current information and to safeguard participant confidentiality under these rules.  01. General Records Requirements. Each participant record must contain the following information: d. Profile sheet containing the identifying information reflecting the current status of the participant, including residence and living arrangement, contact information, emergency contacts, physician, current	In review of agency documentation, for participant #1, the profile sheet had a place to identify the participant's physician which was left blank. The information is available and must be completed on the profile sheet.	<ol> <li>The physicians name was not stated on the participant profile sheet. Answer / respond to each question on participant profile sheet, leaving no blank spaces.</li> <li>The physicians name was placed on the participant profile sheet and remains in participant file</li> <li>Dianne Cochran, Clinical Supervisor</li> <li>A regular review of the employee files will occur through the agency's QA program to ensure that documentation of participant profile sheet in completed to include completed participant profile sheet</li> </ol>	2/14/2019



medications, allergies, special dietary or medical needs, and any other information required to provide safe and effective care;  16.03.21.905.03.a  905.PARTICIPANT RIGHTS. Each DDA must ensure the rights provided under Sections 66-412 and 66-413, Idaho Code, as well as the additional rights listed in Subsection 905.02 of this rule, for each participant receiving DDA services.  03.Method of Informing Participants of Their Rights. Each DDA must ensure and document that each person receiving services is informed of his rights in the following manner:  a. Upon initiation of services, the DDA must provide each participant and his parent or guardian, where applicable, with a packet of information which outlines rights, access to grievance procedures, and the names, addresses, and telephone numbers of protection and advocacy services. This packet must be written in easily understood terms.	1. All participants and parents have been provided with a packet of information that outlines rights, access to grievance procedures, names and addresses and contact information of protection and advocacy services in easily understood terms  2. On-going weekly review of participant files to check for documentation that participant and parent were provided a packet of information which outlines: rights, access to grievance procedures, names and addresses and contact information of protection and advocacy services in easily understood terms.  Review of Meeting agenda form to include providing participant and parent with informational packet  3. Dianne Cochran, Clinical Supervisor  4. A regular review of the employee files will occur through the agency's QA program to ensure that documentation of participant packet of information has	2/14/2019
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at time of PCP Meeting. Meeting agenda check off list to include providing this packet of information to participant and	
parent.	

Agency Representative & Title:	Arbella Dianne Cochran, Habilitative Interventionist,	Date Submitted: 12/14/2018
Clinical Supervisor, M. Ed		
* By entering my name and title, I agree	to implement this plan of correction as stated above.	
Department Representative & Title:		<b>Date Approved:</b> 12/27/2018
* By entering my name and title, I appro	ve of this plan of correction as it is written on the date identified.	